File with lows Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND Fay 2008 MAY 19 AM 10: 28

	DISCLUSURE	SUMINARY PAGE		
COMMITTEE NAME (Must be	same as on Statement of Orga	nization)		•
JOSH EATON	FOR STATE REALE	SENTATIVE	FORM DR-2	21201 001 121
MPORTANT: Indicate by # type o 1)Statewide/Legislative/Judge St 4)County Central Committee (5)	anding for Relention Candidate (2	?)State PAC (3)State Party tate (7)School Board or Other Political	(Rev. 07/2007)	DISCLOSURE REPORT
subdivision Candidate (8)County 1) Local Ballot Issue	PAC (9) City PAC (10) School E	loard or Other Political Subdivision PAC (For Office Use Or	1712
CANDIDATE COMMITTEES O	NLY:	Political Party (if applicable)	Logged In	
JOSH EATON		Demochitic	Scanned	
Mice Squaht		District (If Senate or House)	Audited	

Subdivision Candidate (8) County PAC 11) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Candidate Name JOSH EATON Office Sought SITTE Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code eection≤ 68B.32A(7) and 68A.401(3), the candidate, for a *(SIS*) 382-3050 5/16/08 THUMPST. F PERSON FILING REPORT DATE SIGNED 5/16/08 I AM FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. indicate by # (report date) CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 23,699.56 of the last reporting period or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD 12,5/1.00 Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) Schedule Fr-Loans Resolved total (Attach Schedule F) /NTEREST GREVED Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... (Schedule H applies to Candidates' Committees Only) 36,246.81 SUB-TOTAL.... SUBTRACT TOTAL MONEY SPENT THIS PERIOD 6,895.83 Schedule B; Expenditures total (Attach Schedule B) (**also see debts and loans below)........... Schedule F: Loan Repayments total (Attach Schedule F)..... 29,350.98 CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$ O Ð *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)..... 0 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)...... YES CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: **-**&-VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

BEGIN 2008

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) JOSH ENTON FOR STATE REPRESENTATIVE

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOI FUND- RAISER INCOME
1/1/08	ID# CK#	ALTA P. CARMODY 71751 U.S. HWY 30 COLO , IOWA 50056		\$25000	
1/5/00	ID# CK#	RICH MICHEL 5951 EASLE RIDGE DRIVE NEBRASKA CITY, NE 68410		*20°	
1/11/08	ID# CK#	AFSCME / IOWA PUBLIC EMPLOYEES COUNCIL 61 - PEOPLE ACCOUNT 4870 N.W. SECOND AVENUE DES MOINES, ZA 50313		\$ 500 ∞	
1/11/08	CK#	T.B.E.W. EDUCATIONAL COMMITTEE 900 SCHENTH STREET, N.W. WASHINGTON, D.C. 20001		1,000 =	
1/31/08	CK#	BYLON L. LAMPE 514 WEST MADISON ST. LAKE CITY, IA 51449		100-	
2/22/08	ID# CK#	UNITEMIZED RECEIPTS FROM PASS THE HAT		2600	~
2/25/08	ID# CK#	LAWRENCE D. SCHMIDT 3741 513 STREET WALKER , IONA 52352		250 €	
2/26/02	ID# CK#	TIM MARSHALL 6412 RUSSELL DRIVE NW CEDAR RAPIDS, IOWA 52405		20∞	
2/26/08	ID# CK#	PAUL MONTOURR 1201 N 5T STREET MANCHESTER , IONA 52057		20 ^{se}	
2/26/08	ID# CK#	BOB WYMQLE 1216 WEST STATE STATET 1715-ON CITY, JONA		5 °	
		TOTAL (if last page of	SUB-TOTAL this schedule)	\$2,191.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consunguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH EATON FOR STATE REARESENTATIVE

4000	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
2/26/08	ID# CK#	MATT FRANK 24 LINDEN DAIVE MASON CITY , IONA 50401		\$ 10 99	
2/26/08	ID# CK#	FRANK JENNINGS 1060 U AVENUE NEUARA, IOWA 50201		202	
2/26/08	ID# CK#	TYLEE NORGART 926 WEST STREET COLD JOUA 50056		4000	
126/08	ID# CK#	DON ELAND 2704 AMELIA ST. BURUNGTON, IOWA 52601		50°	
426/08	ID# CK#	DAN HOFFMAN 822 E. MICHIGAN ST. MISSOURI VALLEY, IOUM EISES	•	10=	
2/26/08	ID# CK#	DATE HULL 3704 NEPTUNE DRIVE CALTER LAWE, IONA 51510		200	
2/24/08	ID# CK#	Rich Kyrtenbach 238 Normandy Street Wateroo , Iowa 50703		2∞	
2/26/08	ID# CK#	BILL HANES 607 GREEN ACRES DRIVE SOLON, JOWA 52333		20≌	
2/26/08	ID# CK#	SAUDRA GALER 4703 TWN ANE DR. NE CLOSA RAPIDS, JOWA 5Z40Z		5	
426/08	ID# CK#	DON KRAUSE 3626 OAKCREST DAUS DES MOINE, IOWA 50310		5∞	
			SUB-TOTAL	s 185.00	*************************************

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TOTAL (if last page of this schedule)

Page 2 of 6 (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH EATON FOR STATE REARESENTATIVE

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT	√ IF FOR FUND- RAISER INCOME
2/26/08	CK#	STEVE BISHOP 1706 1974 PLACE WEST DES MOINES, IOWA 50265	·	\$ 800	
2/24/08	ID# CK#	KEVIN JOHNSON 4800 ASH DANE PLEASANT HILL, JOHA 60237		2000	
120/08	ID# CK#	SANDY OPSTVEDT 1309 PARLYIEW DENG STORY CITY, IOWA 50248		200	
2/24/08	ID# CK#	NORM STERZENBACH 1724 HMILITANST. SW CEBAR RAPIDS, IONA 62404		209	
426/08	ID# CK#	KURT DONNELLY 1700 524 AVENUE. SUITEA MOUNE, ILL 61265		205	
2/26/08	ID# CK#	CHARLE SMITH 2023 S. BLUFF CLINTON, JOWA 52732		2000	
2/26/08	ID# CK#	DER HANSON 1349 : SUN ADUN RIDGE IOWA CITY, IOWA 52246		20€	
2/26/05	ID# CK#	DANIEL BARE 1643 290 ST. NW CEDAL RADIUS, IQUA 52405	·	. 20=	
2/24/08	ID# CK#	UNITEMIZED RECEIPTS FROM PAGE THE HAT		87≌	V
2/26/08	ID# CK#	GLORIA JEAN KNOBBE 1315 E. WASHINGTON ST. ZOWA CITY, ZOWA 52246	MOTHER	100 <u>≈</u>	
			SUB-TOTAL	s 335,00	

TOTAL (If last page of this schedule)

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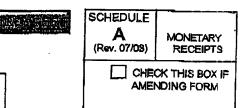
Page 3 of 4

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSY EATON POR STATE REPRESENTATIVE



STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISOLOSURE BOARD.

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER		TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER INCOME
3/31/08	ID#	PASS THE HAT UNITERIZED RECEIPTS		s 329 ∞	
4/20/08	ID# CK#	SELDEN SPENCER. 823 BHWOOD DELVE HUKUET, IDWA 50124		2700	
4/20/08	ID# CK#	CALUIN MALLIBULTON 1128 ROSELULT AMES, IONA SOCYO		5000	
5/12/08	ID# 8026 CK# 17469	1.B.E.W. EDUCATIONAL COMMITTE 900 SEUSINTY STREET, N.W. WASHINGTON, D.C. 20001		8,000	
5/13/08	ID# CK#	TOE P. SMITH 1700 S.E. 1512 STREET OKLAHOMACHY, OK 73129		20€	·
5/13/08	ID# 9716 CK# 2216	1:BG.W. LOCAL 347 850 182 STREET SES MOINES, IOWA 50314		1,000	
5/16/08	D# CK#	THOMAS L. ALLER 1089 CEDAR WOODS ROAD CEDAR RAPIBS, IA 52403	1	25000	
5/17/08	ID# CK#	DON BENSEN 446 N. GREEN OTTUMWA ,IA 62601		5∞	
5)17/08	ID# CK#	MIKE EMBERON 501 E. JEFFERSON KNOKVILLE, IOWA 50138		5 °	
5/17/08	ID# CK#	JOBH IGLEHART 829 SE 2M ANKENY, IOWA SOZOI		5 <u>*</u>	
			SUB-TOTAL	2 40 .10	

TOTAL (if last page of this schedule)

 Disclosure taw requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH EATON FOR STATE REPRESENTATIVE

SCHEDULI A (Rev. 07/03	MONETARY RECEIPTS
	ECK THIS BOX IF ENDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
5/17/08	ID# CK#	VICTOR ANDERSON P.D. BOX 133 ELKHART, IOWA 50073		\$ 5∞	
5/17/08	CK#	DERRICK VAN ZANDT 2922 GARTIELD AVENUC DES MOINES, JOWA 60317		5∞	
5/17/08	CK#	TERLY FLEEMAN 1349 G. 972 STLSEF DES MOIMS FOUR SO316		100	
5/17/08	ID# CK#	BRIAN OPSTVEDT 1309 PALKUIEU DAWE STORY (ITY , TOWA 50248		400	
5/17/08	ID# CK#	MILE SAWYES 8027 WAREN DAWE DES MOINES, FOWA 50320	· · ·	520	
5/17/08	ID# CK#	JAMES BLANK 24670 CLEVELAND ST. SWAN, IOWA 50252		2€	
5/17/08	ID# CK#	Mike Brookes 8051 Sunclest Des Moines, Iowa 50330		400	
5/17/08	CK#	KEUIN TOUNSON 4800 NSU DRIVE PLENSONT HILL JOWN 50827		200	
3/17/08	ID# CK#	HEATH HUFF 13833 NE 147 ALLEMN , IOWG 50007		25	
5/17/08	ID# CK#	ANDREW NELSON 3948 120 DES MOINES IOWA 50313		5≌	
]			SUB-TOTAL	\$ 44£	•

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Page 5 of 6 (for Schedule A)

TOTAL (If last page of this schedule)

For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH EATTON FOR STATE REARESENTATIVE

SCHEDULE . A (Rev. 07/03)	MONETARY RECEIPTS
	OK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
5/17/08	ID# CK#	GEORGE BANDSTNE 8667 SWANY HILL DAINE CLIVE, IONA 50325		\$ 200	
5/17/08	CK#	ED MYERS 2927 1701 MARSHAUSOWN , IOWA 50158		12 ∞	
5/17/08	CK#	TONY BOATWEIGHT 2109 310TH STREET MONTEOSE, IOWA 52639		100	
5/17/08	ID# CK#	STEVEN FASTENOW 401 SW ELM AFT 201 MUDNY JOWA 50023		5∞	
5/17/08	ID# CK#	TEREMY STUDER 7 N MAPLE ST LUVERNE, JOWA 50560	·	2∞	
5/17/08	ID# CK#	SCOTT O. SMITH 2400 E 16TH STREET DES MOINES, IOWA 50316		100	
5/17/08	ID# CK#	RUSS BUCK 523 CEDAR STREET STORY CUTY, IOWA 50248		450	
5/17/08	ID# CK#	SHANE NELSON 3401 E. 5240 STREET DES MOINES, IOWA 50317		200	
	ID#			~~~	r
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	!D#				<u></u>
	CK#				
			SUB-TOTAL	. 45 00	

TOTAL (if last page of this schedule)

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Page 6 of 6 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE; FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH GATON FOR STATE REPLESENTATIVE

DATE EXPENDED (MWDD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/31/08	ID# CK# / 003	LIFETOUCH 1105 GT STREAT NBAMA, IOM 50201	PHOTOS FOR FLYERS	\$ 37 ⁴⁵
2/25/08	ID#	CARTER PRINTING 1739 EAST GRAD AVENUE DES MOINES, JONA 50316	1000 CAMPATION CARAS	16170
2/26/08	ID# CK# /005	HOLLY SAGAR 4018 E 24 CT. DESMOWE, ZOWA 50317	CREATE WEBSITE	775 00
³ /17/08	ID# CK# <i>1006</i>	CARTER PHINTING 1739 EAST GRAND AGENUE DES MOINES JONA 50316	(1) 18×24 MOUNTED POSTER	23 85
3/18/08	ID# CK# <i>10</i> 07	AWARDS & T-SHIETS SABIALISTS, IAC 10400 E. 63AL STEEF RAYTOWN, MO. 64133	MAGNETIC NAME TAGS	34≌
3/20/08	ID# CK# <i>i 008</i>	CALTER PRINTING 1739 EMT GRAND ANDVIE DES MOINES, IOWA 50316	250 CAMANTEN CARAL	30740
4/5/00	ID# CK# <i>[DO</i> 9]	CASEYS GENERAL STREE 1136 LINCONWAY NOUAN, IONA 50201	(4) Preza for book knockers	55 60
4/10/08	IĎ# CK# J010	NEWARA JOURNAL 1210 67 STREET NGUARA, JOWA SOZOI	ADVERTISMENT FOR RECEPTION PARTY ON 4/20/08	67≌
			SUB-TOTAL TOTAL (If last page of this schedule)	\$ 1462.83 \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-reising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A 402(3)(i).)

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Page	7	of 🔫	

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NOING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

JOSH EATON FOR STATE REPRESENTATIVE

V - V	TE CITICAL	I UK SIMIE KEPKESENTAT	/VE	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/10/08	ID# CK# /0[]	CRETER PRINTING 1739 EVET GRIND AVENUE DES MOINTES, IA 50316	600 MENTAND GREET CARDS	\$ 18 ²⁹
4/16/08	ID# CK# /012	FACO ASSOCIATES, INC. 1440 MARE ADE, STE. IDA LISLE, IL 60532	DEMOCENTIC POLLSTERS	500000
4/17/08	ID# CK# <i>1013</i>	U.S. POST OFFICE NEVADA, IOWA 50201	TO OUSENITE CONTEACT + ATTMENT TO FINE AND ASSOCIATES, WC.	16 25
4/30/08	ID# CK# / O/ -{	U.S. POST OFFICE NEUADA, IOWA SUZOI	OUDEN TE MAIL TO ROB MARTWICK	1625
5/15/08	ID#	NASER HALAWA 669 3107 STEELT DES MOINES, IA 50312	MILEMBE + POSTAGE	387 점
	ID# CK#			
	ID# CK#			With the custon who did the debut
	ID# CK#			
· · · · · · · · · · · · · · · · · · ·			SUB TOTAL	

SUB-TOTAL
TOTAL (if last page of this schedule)

*5,433.00 \$6,895,83

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iterrized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	2	of	2	

OMMITTEE N			開放在8回		
	AME(Must be same as on Statement HEATON FOR STATE			_ OF	
RT I - NAME A	IND ADDRESS OF CONSULTANT			AMENDING	
lame of Const		SOUMES, INC.		•	- 1-
lailing Addres	8			· · · · · · · · · · · · · · · · · · ·	
1440 ity	MAPLE AVENUE,				
LISL		6053Z		•	
ONTRACT PE	RIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSAT	ION FOR PERFOR	MANCE	
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